

well be one as to whether we are sure that the descendants of the tamed parasites of small-pox may not live in some of us and be capable of causing disease many years after they have left their valued little scars.

I am, Sir, yours faithfully,

Portland-place, W., Feb. 14th, 1914. J. JACKSON CLARKE.

THE TUNING-FORK AS AN AID TO DIAGNOSIS.

To the Editor of THE LANCET.

SIR,—When a student in Glasgow my teachers demonstrated its use to the students as an aid in surgical as well as medical cases. This was some 14 years ago, perhaps a little more.

I am, Sir, yours faithfully,

Doncaster, Feb. 16th, 1914. T. L. ASHFORTH.

EXPERIMENTAL SYPHILIS ON MONKEYS.

To the Editor of THE LANCET.

SIR,—I shall be much obliged if either you or some of your readers can enlighten me upon a point connected with the above subject. About 1906 Metchnikoff and Roux inoculated some monkeys with syphilis. Were any of the sores—primary or secondary—examined for the spirochætae, and was the blood of those animals examined for the Wassermann reaction and with what result?

I am, Sir, yours faithfully,

Liverpool, Feb. 15th, 1914. ROBT. R. RENTOUL.

A NATIONAL MEDICAL SERVICE.

To the Editor of THE LANCET.

SIR,—Asked how it is possible to combine the principle of a whole-time salaried service with free choice of doctor, Mr. Parker says: "I can see no reason why the present system of allotting patients should be discontinued if to-morrow the 20,000 panel doctors became whole-time salaried officers under the State." But surely there is the essential reason that under the present system a man can by refusal to accept patients, or by making himself so inaccessible or disagreeable that few desire to choose him, limit the size of his list almost indefinitely. If he does so, of course he also limits his remuneration, and that is his own affair. But such a privilege could not possibly be accorded to a man with a fixed salary. Whoever offers or pays the salary must see to it that a responsibility commensurate with the salary is accepted and met. It almost seems as if Mr. Parker must be using the words "free choice of doctor" in some different sense from that generally understood by the profession and by those of his colleagues in the State Medical Service Association who are so strongly opposed to the principle. These opponents of "free choice" say that it "makes the doctor conformable to the wishes of the patient" or "places the doctor under the control of the patient," or "makes the doctor regard the interests of his patient and disregard the pecuniary interest of his Approved Society." Many of us think that in the interest of the health of the nation all these conditions are preferable to those which would obtain under a whole-time salaried service. But we cannot understand how it is that at the same time some members of his association are calling out for a whole-time salaried service in order to save us from what they regard as

these dangers of free choice of doctor, whilst Mr. Parker himself is asserting that all the advantages of "free choice," such as they are, can be secured in connexion with a whole-time salaried service. One or the other must surely be wrong. I cannot help thinking it is Mr. Parker, and would ask him to reconsider his position and endeavour, since he sees no serious dangers in free choice, to persuade his association to build their national service on the basis of a panel system with free choice of doctor. The foundations are already laid. No uprooting process is necessary. The profession need not be divided into doctors of the rich and doctors of the poor. The fair visions that Mr. Parker has seen of the linking up of hospital work and general practice, and the extension of medical aid to every individual who needs it, might thus possibly become realities whilst some of us are still alive. Before the task of transforming the medical profession into a salaried branch of the Civil Service the boldest reformer might hesitate.—I am, Sir, yours faithfully,

Harley-street, W., Feb. 15th, 1914. LAURISTON E. SHAW.

To the Editor of THE LANCET.

SIR,—If Mr. Parker imagines he has solved the problem of "free choice of doctor" as applied to a State Medical Service, few of your readers will share his opinion. To many it will appear that he does not himself see the difficulties to be encountered. Suppose "20,000 panel doctors became whole-time salaried officers under the State. At first there would be discrepancies with regard to the number on each doctor's list, but things would soon adjust themselves to the altered circumstances." Are all these 20,000 panel doctors in his proposed State service to be paid uniform salaries, as is usual in a Government service, or are their salaries to be according to the number of panel patients they each bring with them? Then as "things adjust themselves to the altered circumstances," is the State to make a revision of the salary each year, in the hope that when the adjustment is finally reached a uniform salary may be possible? Mr. Parker may consider such a service "analogous" to a State service, but it might also be described as the present panel system under State protection, and it might possess considerable advantages for some practitioners not possessed by a real State service. A panel doctor entering the Government service under such conditions might naturally expect that his salary should not be less than he already has from his panel patients. He would also be entitled to fair compensation for other professional emoluments he was required to resign. This might be good business for a few practitioners with a large panel, who might be enabled to draw the same salary without half the worries and anxieties which belong to them at the present time. But it is only a minority that have large panel practices, and the great majority would have to exist on an exceedingly moderate salary "while things were adjusting themselves," looking out for the crumbs that fell from the tables of their more fortunate brethren—i.e., the number over 3000—that might be compelled to select one of them. Perhaps it is wrong to say "compelled," for these patients, Mr. Parker says, have really as much "free choice" as they have at present, and the "free choice" is only taken away from the doctor, who might be willing to attend more than 3000. He is in error as